

## SINGAPORE ACCIDENT STATEMENT

### IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy ability.
4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
5. Any false reporting may be referred to the Police for investigation.
6. This report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will, for a fee, be made available upon application by interested parties.
7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.

### ACCIDENT STATEMENT

Date Of Report	31/07/2018 16:16
Date Of Accident	28/07/2018 23:15
Exact Location Of Accident	PIONEER ROUNDABOUT
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLT7047Y
<b>Insured/Policyholder</b>	
Name Of Registered Owner	NEO POH KHIM
NRIC No	S1716253E
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-90082823
Alternative Phone No	Others-90082823

### Vehicle Particulars

Manufacturer	KIA
Model	CARENS 1.7 DIESEL SX
Exact Purpose for which vehicle was being used at time of accident	RETURN HOME AFTER WORK
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	PRIVATE CAR

### Insurance Company

Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	1700075188
Cover Note Number	

### Driver

Name of Driver	LOW WAI KIAT,DOMINIC
NRIC No	S9101627C
Date Of Birth	13/01/1991
Occupation	INDOOR
Date Of Driving Pass	12/01/2018
Driving Experience	0 YEAR AND 6 MONTH

Gender	MALE
Mobile Number	(LOCAL) +65-90082823
Fax Number	
Contact Number	
E-Mail Address	DOMINICLOW92@HOTMAIL.SG
Address	BLK 339 TAMPINES ST 33 #05-230
Postcode	520339
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	CHILDREN
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

#### General Information of the Accident

Type Of Accident	SIDE SWIPE
Weather Conditions	CLEAR
Road Surface	DRY

#### Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	
Was any body injured in the Accident?	NO
Was any injured conveyed to hospital by ambulance?	NO
Was any other material or property damaged?	YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	1

#### Details of Police Action

Was the accident reported to the police?	NO
If Yes, Please state which Police Station	
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

REFER TO ATTACHMENT

#### Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Was there any audio recorded?	NO

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SHB5760B
Vehicle Make/Model/Colour	TOYOTA PRIUS/MAROON
Details Of Properties	SMRT
Vehicle Category	TAXI
Name of Driver	
NRIC/Passport Number	
Contact Number	

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

## Sketch Plan

### SKETCH PLAN

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#### **8. Consent under the Personal Data Protection Act (PDPA)**

I understand, acknowledge, agree and consent that:

- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the Insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of:
  - (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
  - (ii) investigating the accident and/or my claims;
  - (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
  - (iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or
  - (v) complying with applicable law in administering, processing, handling and/or dealing with my claims.(collectively the "Purposes")
- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and
- (c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents(including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
  - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
  - (ii) for complying with requirements under any regulations, laws or court orders.



Policyholder's Signature

Date & Time: 31/7/18



Driver's Signature

(If driver is not the policyholder)

Date & Time: 31 July 2018



Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

A hand-drawn map on grid paper showing a road intersection. A vertical road is labeled 'Pioneer Road' at the top and 'Pioneer road' at the bottom. A horizontal road is labeled 'AYE (City)' at the top and 'Jln Ahmad Ibrahim' at the bottom. A central circle represents a roundabout. Arrows indicate traffic flow: clockwise around the circle. A small square area near the top left of the circle is labeled 'S1747074' and 'S1657108'.

On 28/07/18, I drove along pioneer road into pioneer circle to exit at AYE (city) for home.

On reaching near the exit to pioneer road north, a taxi suddenly cut in from my right and hit my vehicle, causing me to steer into pioneer road north instead of travelling to my next exit into AYE (city).

I/We declare the foregoing particulars are true in every respect.

Date & Time: 31 July 2018

NRIC/FIN No.:

Accident Photo





Accident Photo



Accident Photo





Accident Photo



**Accident Photo**



**Accident Photo**



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**Accident Photo**



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### Accident Photo



Accident Photo



**Accident Photo**





Accident Photo



## Driving License



Accident Photo



Accident Photo



Accident Photo





**Accident Photo**



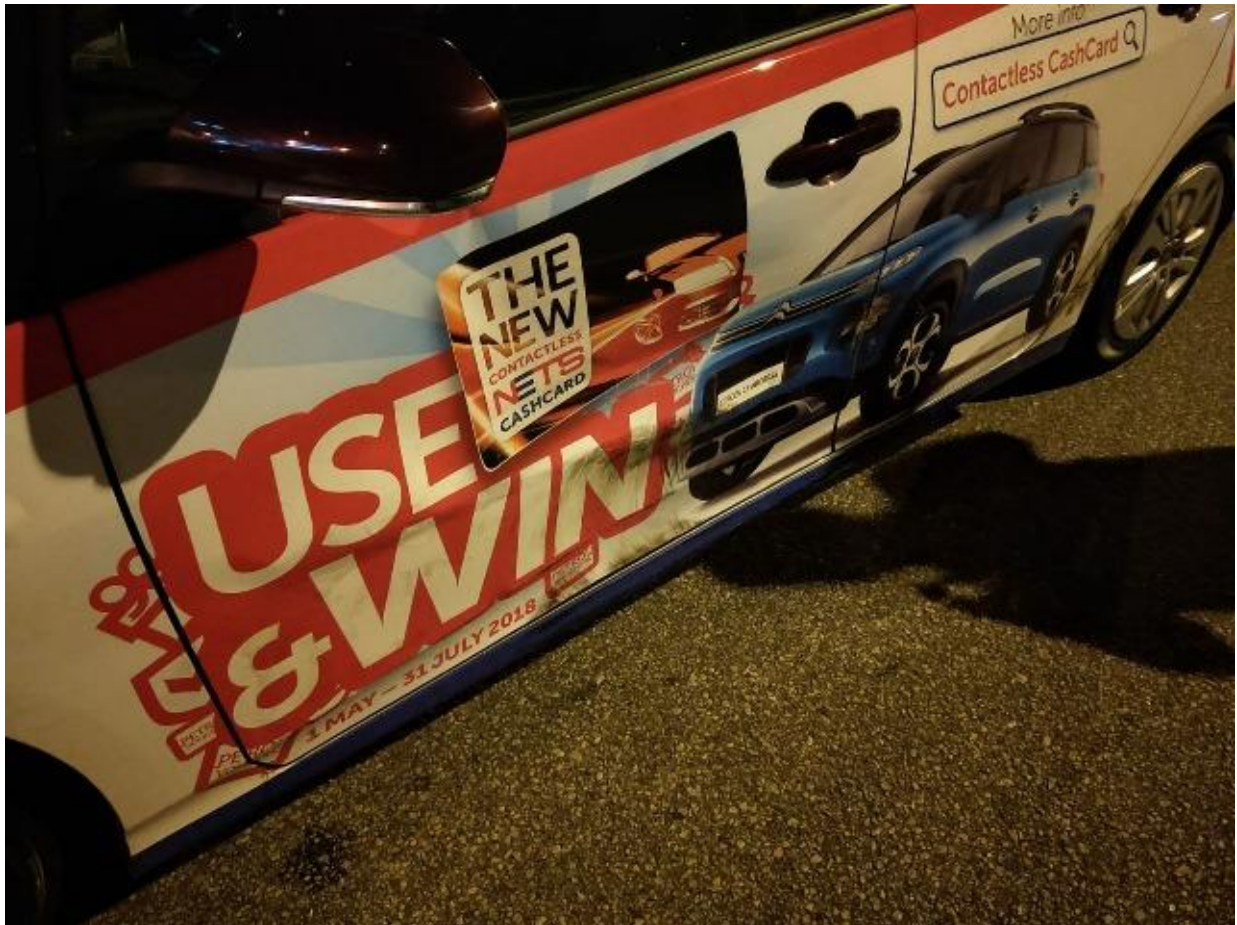
Accident Photo



Accident Photo



Accident Photo





Accident Photo





Accident Photo



## Driving License

PUBLIC OF SINGAPORE

DRIVING LICENCE

Portrait of a man

License Number: **S 9101627C**

Name: **LOW WAI KIAT, DOMINIC (LIU WEIJE)**

Birth Date: **13 Jan 1991**

Issue Date: **12 Jan 2018**

Barcode: **K002763450B1**

FOR C&C USE ONLY

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